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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 03/16/2005 ROCKWELL AUTOMATION INC SUSAN M DONAHU 1201 SOUTH SECOND STREET							
MILWAUKEE, W 05/27/2005 GWORDOF2 00		081	PADEMICK OF	· · · · · · · · · · · · · · · · · · ·		date indicated below. (Depositor's na	
01 FC:1501 1400	.00 DA .00 DA			Susan M. May 24,	M Dona	(Signat (D	
APPLICATION NO.	FILING DATE	FIRST NAMED INVI		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/716,081	11/17/2003	Gregg M. Sichn		ichner	ROKZ 2 00006	4868	
TITLE OF INVENTION: MODULAR ELECTRICAL DEVICE WITH I			IPROVED SEAI	L	04AB022		
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	06/16/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
TSUKERMAN, LARISA Z 283				439-271000	_		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ROCKWELL AUTOMATION TECHNOLOGIES, INC. MAYFIELD HEIGHTS, OHIO U.S.A.							
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the pate	nt): 🗖 Individual 🕱 (Corporation or other private g	roup entity 🗖 Governm	
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
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Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 01-0857 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						-	
					ly paid issue fee to the applic sistered attorney or agent; or		
							

Authorized Signature Stall Wall

May 24, 2005

37,464 Registration No.

William R. Walbrun Typed or printed name _

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